

The Honorable Lauren King

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE**

STATE OF WASHINGTON, et al.,

Plaintiffs,

v.

DONALD J. TRUMP, in his official capacity  
as President of the United States, et al.;

Defendants.

NO. 2:25-CV-00244-LK

PLAINTIFFS' MOTION FOR LEAVE  
TO PROCEED UNDER PSEUDONYMS

NOTE ON MOTION CALENDAR:  
FEBRUARY 28, 2025

## I. INTRODUCTION

Three individual Plaintiffs in this action (Physician Plaintiffs) are board-certified physicians who provide necessary, evidence-based, gender-affirming medical care to adolescent patients in Washington State. They bring this suit, along with the States of Washington, Minnesota, and Oregon (Plaintiff States), to challenge the constitutionality and legality of an executive action that baselessly denigrates the medical treatment they provide as “chemical and surgical mutilation,” threatens them with bad-faith criminal investigation and prosecution, and upends their patients’ ability to receive gender-affirming care. Together, the Plaintiff States and Physician Plaintiffs submitted dozens of sworn declarations from transgender young people—and the parents and health care providers who care for them—in support of their motion for a temporary restraining order enjoining enforcement of the Executive Order.

In a political environment where these Physician Plaintiffs and the individual witnesses are already subject to frequent threats to their physical and professional safety, the Physician Plaintiffs and many of the Plaintiff States’ witnesses are rightly concerned that revealing their identities as part of the plaintiff group challenging this executive action would be fraught with even more risks, and needlessly so. While this case concerns gender-affirming medical care, which the Physician Plaintiffs provide, no issue in this case will turn on the specific identities of these doctors or other providers, patients, or patients’ family members who submitted testimony under pseudonym.

Accordingly, there is good cause for the Court to allow Physician Plaintiffs to proceed under pseudonyms in this action. Courts routinely permit this in cases involving the rights of transgender and gender-diverse individuals and threats to livelihoods, and the same concerns exist here, given the highly sensitive nature of Physician Plaintiffs’ work and seriousness of the threats they would almost certainly receive if their identities are publicly broadcasted. Exposing Physician Plaintiffs to the inevitable harassment, threats, and harm that would come with their public association with this lawsuit does not serve any legitimate purpose. The same is true of

the declarant witnesses whose testimony the Plaintiff States offered pseudonymously because the witnesses reasonably fear for their safety or livelihoods, or those of their patients. The focus in this case is the unconstitutional and cruel assault by the federal government on people seeking gender-affirming care, their families, and their medical providers—not the identities of the Physician Plaintiffs or other individuals being targeted.

## II. STATEMENT OF FACTS

Physician Plaintiffs 1, 2, and 3 are Seattle-based physicians who treat transgender and gender-diverse adolescent patients. Decl. Physician Plaintiff 1 ¶ 2; Decl. Physician Plaintiff 2 ¶¶ 4–5; Decl. Physician Plaintiff 3 ¶¶ 3, 6. Where medically indicated, these physicians provide gender-affirming medical care to their patients. Decl. Physician Plaintiff 1 ¶ 4; Decl. Physician Plaintiff 2 ¶ 8; Decl. Physician Plaintiff 3 ¶ 7.

On January 28, 2025, President Donald Trump issued an Executive Order to defund and purportedly criminalize gender-affirming care for patients younger than nineteen years old. Exec. Order 14,187, Protecting Children from Chemical and Surgical Mutilation, 90 Fed. Reg. 8,771 (Jan. 28, 2025) (the “Order”).

On February 7, 2025, this lawsuit followed. Plaintiffs are the States of Washington, Minnesota, and Oregon, and the three Physician Plaintiffs. Dkt. # 1. The Plaintiff States and Physician Plaintiffs contemporaneously sought a temporary restraining order, and many of the declarations filed in support of that motion were submitted under pseudonym for reasons given in each declaration by the witness. *See* Dkt. ## 11-117. The Physician Plaintiffs attested to fear for their personal safety, fear of prosecution, and fear for their minor patients. Decl. Physician Plaintiff 1 ¶¶ 28–30; Decl. Physician Plaintiff 2 ¶¶ 33–34; Decl. Physician Plaintiff 3 ¶¶ 32, 38. Many witnesses cited fear of retaliation or baseless prosecution by the federal government as well as harassment or violence as reasons for seeking to use a pseudonym. *See, e.g.*, Decl. A.M.M. ¶ 3; Decl. R.R. ¶¶ 17, 19; Decl. W.J. ¶ 14; Decl. C.L. ¶ 16; Decl. Drs. Doe ¶ 38.

### III. ARGUMENT

In the Ninth Circuit, “[w]here it is necessary . . . to protect a person from harassment, injury, ridicule or personal embarrassment, courts have permitted the use of pseudonyms.” *United States v. Doe*, 655 F.2d 920, 922 n.1 (9th Cir. 1980). This is so that “a party may preserve his or her anonymity . . . when the party’s need for anonymity outweighs prejudice to the opposing party and the public’s interest in knowing the party’s identity.” *Does I thru XXIII v. Advanced Textile Corp.*, 214 F.3d 1058, 1068 (9th Cir. 2000). The factors to be balanced are “ ‘(1) the severity of the threatened harm, (2) the reasonableness of the anonymous party’s fears, . . . (3) the anonymous party’s vulnerability to such retaliation, (4) the prejudice to the opposing party, and (5) the public interest.’ ” *Doe v. Kamehameha Schools/Bernice Pauahi Bishop Est.*, 596 F.3d 1036, 1042–45 (9th Cir. 2010) (quoting *Does I thru XXIII*, 214 F.3d at 1068). Here, all five factors strongly support permitting Physician Plaintiffs to file under pseudonyms.

*First*, the severity of harm is high. This Court (and others) have repeatedly granted anonymity to plaintiffs in cases where there are concerns that the public revelation of the plaintiffs’ identities would lead to severe professional repercussions and risk their physical safety, particularly in cases affecting the rights of transgender people. *See, e.g., Karnoski v. Trump*, No. 2:17-cv-01297-MJP, 2017 WL 11431253, at \*1 (W.D. Wash. Oct. 10, 2017) (granting transgender military member’s request to proceed under pseudonym because “[g]iven Defendants’ decision to ban transgender people from military service, requiring Jane Doe to disclose her identity could lead to her separation from the military; the loss of her military career would also mean the loss of her career benefits”); *Jane Does 1-2 v. Office of Personnel Mgmt.*, No. 1:25-cv-00234-RDM, 2025 WL 384577, at \*2 (D.D.C. Feb. 4, 2025) (granting federal employees’ motion to proceed under pseudonyms in challenge against federal agency based on fears of retaliation and termination); *see also, e.g., Poe v. Labrador*, No. 1:23-cv-00269-BLW, 2023 WL 8935065, at \*19 (D. Idaho Dec. 26, 2023) (permitting plaintiffs, transgender adolescents and their parents, to proceed under pseudonyms in challenge to ban on

gender-affirming medical care); *Doe v. Pa. Dep't of Corr.*, 585 F. Supp. 3d 797, 808-09 (W.D. Pa. 2022) (granting anonymity to transgender inmate); *Doe v. Pence*, No. 1:16-cv-02431-JMS-DML, 2016 WL 11578507, at \*1 (S.D. Ind. Nov. 22, 2016) (granting anonymity to transgender plaintiff seeking asylum); *cf. Doe v. Frank*, 951 F.2d 320, 324 (11th Cir. 1992) (“Courts have permitted Plaintiffs to proceed anonymously in cases involving. . . transsexuality”); *Int’l Partners for Ethical Care Inc. v. Inslee*, No. 3:23-cv-05736-DGE, 2023 WL 7017765, at \*2 (W.D. Wash. Oct. 25, 2023) (granting the parents of transgender and cisgender children leave to proceed under pseudonyms).

Providers of gender-affirming care are often subject to threats. For years, gender-affirming care providers have been the targets of violent threats and relentless online harassment. *See, e.g.,* Katie O’Connor, *Gender-Affirming Clinics Subject to Onslaught of Threats, Harassment*, Psychiatry Online (Jan. 27, 2023), <https://psychiatryonline.org/doi/10.1176/appi.pn.2023.03.2.5>; Shannon Bond, *Children’s hospitals are the latest target of anti-LGBTQ harassment*, NPR (Aug. 26, 2022), <https://www.npr.org/2022/08/26/1119634878/childrens-hospitals-are-the-latest-target-of-anti-lgbtq-harassment>; *Boston Children’s Hospital receives bomb threat following harassment over transgender care*, ABC News (Aug. 31, 2022), <https://www.nbcnews.com/tech/internet/far-right-influencers-are-targeting-individual-doctors-rcna49701>.

As medical professionals providing gender-affirming care, providers like Physician Plaintiffs are frequently in a position where they and their peers are targets of death threats and online harassment. *See, e.g.,* Emma Davis, *Death threats, legal risk and backlogs weigh on clinicians treating trans minors*, NBC News (Aug. 28, 2024), <https://www.nbcnews.com/out/out-news/trans-minors-treatment-clinicians-laws-bans-rcna164515>; Human Rights Campaign Foundation, *Online Harassment, Offline Violence*, (2022), <https://hrc-prod-requests.s3-us-west-2.amazonaws.com/HRCF-OnlineHarassmentOfflineViolence.pdf> (detailing intensifying harassment and threats to gender-affirming care providers); Brandy Zadrozny and

1 Ben Collins, *Doctors providing trans care are under increasing threat from far-right harassment*  
 2 *campaigns*, NBC News (Oct. 7, 2022), [https://www.nbcnews.com/tech/internet/far-right-](https://www.nbcnews.com/tech/internet/far-right-influencers-are-targeting-individual-doctors-rcna49701)  
 3 [influencers-are-targeting-individual-doctors-rcna49701](https://www.nbcnews.com/tech/internet/far-right-influencers-are-targeting-individual-doctors-rcna49701).

4 Physician Plaintiffs are no exception to this troubling trend, as threats of physical harm  
 5 have already arrived at their doorsteps. The harassment that Physician Plaintiffs currently face  
 6 for providing gender-affirming medical care include protestors with violent messages at their  
 7 workplaces and targeted threats on social media. Decl. Physician Plaintiff 1 ¶ 28; Decl. Physician  
 8 Plaintiff 2 ¶ 34; Decl. Physician Plaintiff 3 ¶ 38. At least one clinic at which a Physician Plaintiff  
 9 works has needed to hire additional security, installed panic buttons, and conducted drills for  
 10 active threats. Decl. Physician Plaintiff 1 ¶ 28. That Physician Plaintiff also attested to having  
 11 an armed individual come to her workplace and threaten medical staff with a weapon. *Id.*  
 12 Broadcasting the Physician Plaintiffs' identities through this litigation could materially  
 13 exacerbate these risks, and needlessly risks exposing these providers and their colleagues to an  
 14 onslaught of threats, doxxing, and politically-motivated violence.

15 In addition to increased risk of harm and harassment from non-parties, the public  
 16 revelation of the Physician Plaintiffs' specific identities risks harm from the federal agencies  
 17 themselves. As providers of gender-affirming care who are taking part in a lawsuit against the  
 18 federal government, Physician Plaintiffs could experience retaliation by federal actors, including  
 19 baseless criminal investigation under a bad-faith application of criminal law, or loss of federal  
 20 research grants. Decl. Physician Plaintiff 1 ¶¶ 30–31. Physician Plaintiffs specifically attest to  
 21 their fears of being federally investigated or prosecuted for providing evidence-based medical  
 22 that is protected in Washington—fear that is grounded in the language of the Order and  
 23 statements from the White House. *Id.* ¶¶ 28–29; Decl. Physician Plaintiff 2 ¶ 27; Decl. Physician  
 24 Plaintiff 3 ¶ 32. Given the prospect of harassing criminal investigation and prosecution if  
 25 Physician Plaintiffs' identities are revealed, they stand to risk much more than “employment  
 26 opportunities” or their “freedom to pursue the occupation of [their] choice”—concerns that other

1 courts have found justified other physicians’ requests to proceed under pseudonym—although  
 2 those concerns loom large as well. *Doe v. Lieberman*, No. 1:20-cv-02148, 2020 WL 13260569,  
 3 at \*3 (D.D.C. Aug. 5, 2020) (granting plaintiff physician’s request to proceed under pseudonym  
 4 with suit against federal government due to concerns about professional repercussions including  
 5 being “unable to practice medicine”).

6 And the Physician Plaintiffs are not only worried for themselves. Revealing Physician  
 7 Plaintiffs’ identities in this lawsuit also puts at risk their minor patients. If the Physician  
 8 Plaintiffs’ identities were released, it would lead to the disclosure of the specific facilities at  
 9 which they practice. This, in turn would undoubtedly lead to increased protests at their  
 10 institutions, impacting not only themselves and their colleagues, but their minor patients who  
 11 must visit those facilities in order to obtain medical care. The transgender and gender-diverse  
 12 adolescents that Physician Plaintiffs treat are themselves members of a group subject to  
 13 discrimination, harassment, and violence because of their transgender status. As explained in  
 14 their declarations (and as discussed below) the patients of Physician Plaintiffs are already fearful  
 15 and distraught following issuance of the Order. Revealing the Physician Plaintiffs’ identities  
 16 would have ripple effects on their minor patients, by requiring their minor patients to contend  
 17 with scarier and angrier protest lines just to obtain the medical care they need. Harm to innocent  
 18 non-parties that could be exacerbated by the revelation of Physician Plaintiffs’ identities weighs  
 19 heavily in favor of anonymity. *See Doe v. Mass. Inst. of Tech.*, 46 F.4th 61, 71 (1st Cir. 2022)  
 20 (“[P]arty anonymity ordinarily will be warranted” where “identifying the would-be Doe would  
 21 harm innocent non-parties.”) (internal quotation marks omitted); *accord James v. Jacobson*,  
 22 6 F.3d 233, 238 (4th Cir. 1993) (“[F]actors that should be considered by courts considering  
 23 anonymity requests . . . [include] innocent non-parties; [and] the ages of the persons whose  
 24 privacy interests are sought to be protected”).

25 *Second*, on the reasonable risk of harm, Plaintiffs’ fears of professional and physical  
 26 repercussions for revealing their identities are not merely speculative, as illustrated by the current

level of politically-motivated threats lobbied at them and their staff that promises to be supercharged following the Executive Order. Decl. Physician Plaintiff 1 ¶ 28; *see also* Decl. Physician Plaintiff 2 ¶ 34; Decl. Physician Plaintiff 3 ¶ 38. Even before the Executive Order, providers of gender-affirming care to adolescents have widely experienced threats of violence, doxxing, and bomb threats. *See* Landon D. Hughes, et al., *Adolescent Providers' Experiences of Harassment Related to Delivering Gender-Affirming Care*, 73 J. of Adolescent Health 672–78 (2023), DOI: [10.1016/j.jadohealth.2023.06.024](https://doi.org/10.1016/j.jadohealth.2023.06.024) (70% of providers surveyed reported they, their practices, or their institutions had received threats specific to delivering gender-affirming care). And, already, harassment at one Plaintiff Physician's workplace has "drastically worsened" since the Executive Order was issued. Decl. Physician Plaintiff 1 ¶ 28. And this is not surprising, given that the Order decrees, in inflammatory and baseless terms, that providing gender-affirming care to people under nineteen is tantamount to "chemical and genital mutilation," that "maim[s] and sterilize[es] impressionable children." E.O. 14,187. In addition to directing various agencies to limit or eliminate the viability of gender-affirming care by immediately defunding the medical institutions that provide that care, the Order also explicitly directs prioritizing criminal prosecutions and investigations against those it deems participate in "female genital mutilation," even for medication prescription and other care having nothing to do with surgery. *Id.* It also orders the persecution of providers who "mislead[] the public about long-term side effects of chemical and surgical mutilation." *Id.* Physician Plaintiffs' fears of criminal investigation, federal retaliation, and physical harm are eminently understandable, when rhetoric from the White House irresponsibly paints them as dangerous or criminal.

*Third*, regarding vulnerability, should their identities be revealed, Physician Plaintiffs are particularly vulnerable as medical professionals providing gender-affirming care because the scope of the Order squarely targets the provision of that care with financial and criminal consequences. That worry is even more prescient if their identities become more heavily scrutinized because of their status as plaintiffs in this case, given that the Executive Order



1 appears designed to cloak their medical practice with the false, but ominous, specter of  
 2 criminality. *Doe v. Stegall*, 653 F.2d 180, 186 (5th Cir. 1981) (“Although they do not confess  
 3 either illegal acts or purposes, the Does have, by filing suit, made revelations about their personal  
 4 beliefs and practices that are shown to have invited an opprobrium analogous to the infamy  
 5 associated with criminal behavior.”).

6 *Fourth*, the federal defendants suffer no prejudice by allowing Physician Plaintiffs to  
 7 proceed under pseudonyms. Nothing about this case turns on the identity of Physician Plaintiffs,  
 8 and their names are not relevant to resolving the core legal issues addressing the constitutionality  
 9 of the federal defendants’ actions. Courts within the Ninth Circuit have held that the public  
 10 interest in open records is more limited when, like here, plaintiffs allege “widespread” harm and  
 11 “the plaintiff’s identity” is of limited relevance. *Ocean S. v. Los Angeles County*, No.  
 12 2:23-cv-06921-JAK-E, 2023 WL 8191123, at \*3 (C.D. Cal. Nov. 20, 2023) (citing  
 13 *Kamehameha*, 596 F.3d at 1042). It is hard to fathom why federal defendants would have any  
 14 legitimate need to publicly release the specific identities of individual physicians impacted by a  
 15 nationwide ban on transgender care in order to defend the fundamental constitutionality of their  
 16 actions.

17 *Fifth*, the public interest greatly favors anonymity for Physician Plaintiffs. Generally,  
 18 courts are more willing to permit plaintiffs “to proceed anonymously” when, like here, they are  
 19 “challenging the constitutional, statutory or regulatory validity of government activity.” *Coe v.*  
 20 *U.S. Dist. Ct. for Dist. of Colo.*, 676 F.2d 411, 416 (10th Cir. 1982) (citation omitted). That is  
 21 because lawsuits against the government “involve no injury to the Government’s ‘reputation,’  
 22 whereas “the mere filing of a civil action against other private parties may cause damage to their  
 23 good names and reputation and may also result in economic harm.” *S. Methodist Univ. Ass’n of*  
 24 *Women L. Students v. Wynne & Jaffe*, 599 F.2d 707, 713 (5th Cir. 1979); *see also Doe v. Megless*,  
 25 654 F.3d 404, 409 (3d Cir. 2011) (“[B]ecause of the purely legal nature of the issues presented  
 26 or otherwise, there is an atypically weak public interest in knowing the litigant’s identities[.]”).

1 That holds true here, for all the reasons outlined above, as anonymity for Physician Plaintiffs  
 2 “will not obstruct public scrutiny of the important issues in this case.” *A.M.W. v. Mayorkas*,  
 3 No. 2:24-cv-01970-JHC, 2024 WL 5119780, at \*1 (W.D. Wash. Dec. 16, 2024). The public  
 4 certainly has an interest in resolving the constitutionality and legality of the federal defendants’  
 5 actions. The public has no interest in the continued or increased harassment and endangerment  
 6 of physicians providing needed medical care to their patients.

7 *Finally*, the Court should fully consider all witness declarations submitted under  
 8 pseudonym in support of the motion for temporary restraining order. “Whether the circumstances  
 9 warrant anonymity in particular cases is committed in the first instance to trial court discretion,  
 10 which is then subject to appellate review only for “‘abuse.’” *James v. Jacobson*, 6 F.3d at 242  
 11 (observing that “[f]ederal courts traditionally have recognized that in some  
 12 cases . . . identification of parties and witnesses by name should yield in deference to sufficiently  
 13 pressing needs for party or witness anonymity”) (citation omitted). *See also United States v.*  
 14 *Ramos-Cruz*, 667 F.3d 487, 501 (4th Cir. 2012) (witness pseudonyms appropriate where  
 15 witnesses explained heightened danger in testifying against MS-13); *United States v. Doe*,  
 16 655 F.2d at 922 n.1 (“Where it is necessary . . . to protect a person from harassment, injury,  
 17 ridicule or personal embarrassment, courts have permitted the use of pseudonyms.”); *Todd v.*  
 18 *Lovecraft*, No. 19-cv-01751-DMR, 2020 WL 60199, at \*9-10 (N.D. Cal. Jan. 6, 2020) (“The  
 19 privacy and safety interests of [a witness who was a sexual assault victim] are substantial and  
 20 weigh in favor of permitting consideration of the [witness’s] declaration without requiring [her]  
 21 to publicly testify.”).

22 Declarant testimony through pseudonym is more than appropriate here, given the  
 23 sensitive nature of their testimony and the fear they express about being publicly identified.  
 24 Families describe harassment they have suffered for being part of the transgender and gender-  
 25 diverse community. Decl. J.M. ¶¶ 4–10; Decl. T.O. ¶ 3; Decl. K.W. ¶ 10; Decl. K.G. ¶¶ 7–8;  
 26 Decl. M.B. ¶ 14; Decl. R.T. ¶ 10; Decl. A.F. ¶ 7. They describe extremely personal episodes of

self-harm, suicidal thinking, or suicide attempts. Decl. G.T. ¶ 10; Decl. E.C. ¶ 15; Decl. T.O. ¶ 8; Decl. K.G. ¶¶ 5, 13; Decl. M.B. ¶ 5; Decl. R.T. ¶¶ 10, 18, Decl. S.B. ¶ 7; Decl. S.N. ¶ 4; Decl. D.C. ¶ 5. Providers and parents describe fear of misuse of the criminal law and U.S. Department of Justice to investigate or prosecute them. Decl. G.T. ¶ 27; Decl. S.B. ¶ 15; Decl. E.K. ¶ 26; Decl. C.L. ¶ 16; Decl. Marie Doe ¶ 4; Decl. W.J. ¶ 14; Decl. G.M. ¶ 23; Decl. Drs. Doe ¶ 38. And overwhelmingly, these witnesses cite fear of retaliation by the federal government itself as their reason for providing their testimony pseudonymously. Decl. A.M. ¶ 17; Decl. L.L. ¶ 13; Decl. A.M.M. ¶ 3; Decl. S.O. ¶ 3; Decl. R.R. ¶¶ 17, 19; Decl. V.S. ¶¶ 2, 12; Decl. J.W. ¶ 20; Decl. K.M. ¶ 16; Decl. E.C. ¶ 4; Decl. H.M. ¶ 4; Decl. H.R. ¶¶ 3–4; Decl. H.U. ¶ 4; Decl. J.H. ¶¶ 4, 8–9, 12; Decl. J.M. ¶ 3; Decl. J.T. ¶ 3; Decl. K.S. ¶ 2; Decl. K.W. ¶ 18; Decl. K.G. ¶ 3; Decl. K.H. ¶¶ 4, 16, 17; Decl. M.T. and T.T. ¶ 3; Decl. M.F. ¶¶ 44–45; Decl. M.B. ¶ 2; Decl. N.M. ¶¶ 10, 13–14; Decl. R.T. ¶¶ 4, 19; Decl. S.B. ¶ 16; Decl. S.N. ¶ 2; Decl. A.F. ¶ 3; Decl. B.M. ¶¶ 4, 11; Decl. C.K. ¶ 3; Decl. D.C. ¶ 4. Under the circumstances, the witnesses have shown good cause for proceedings via pseudonym and the Court should consider their testimony in full.

#### IV. CONCLUSION

The Physician Plaintiffs respectfully request the Court grant their request to proceed under pseudonyms, and all plaintiffs ask the Court to consider in full all declarations submitted in support of their request for a temporary restraining order.

DATED this 7th day of February 2025.

I certify that this memorandum contains 3,311 words, in compliance with the Local Civil Rules.

NICHOLAS W. BROWN  
Attorney General of Washington

/s/ William McGinty  
WILLIAM MCGINTY, WSBA #41868  
CYNTHIA ALEXANDER, WSBA #46019  
TERA HEINTZ, WSBA #54921  
ANDREW R.W. HUGHES, WSBA #49515  
NEAL LUNA, WSBA #34085  
CRISTINA SEPE, WSBA #53609

1 LUCY WOLF, WSBA #59028  
2 Assistant Attorneys General  
3 800 Fifth Avenue, Suite 2000  
4 Seattle, WA 98104-3188  
5 (360) 709-6470  
6 William.McGinty@atg.wa.gov  
7 Cynthia.Alexander@atg.wa.gov  
8 Tera.Heintz@atg.wa.gov  
9 Andrew.Hughes@atg.wa.gov  
10 Neal.Luna@atg.wa.gov  
11 Cristina.Sepe@atg.wa.gov  
12 Lucy.Wolf@atg.wa.gov  
13 *Attorneys for Plaintiff State of Washington*

14 /s/ Lauryn K. Fraas  
15 LAURYN K. FRAAS, WSBA #53238  
16 COLLEEN MELODY, WSBA #42275  
17 Assistant Attorneys General  
18 800 Fifth Avenue, Suite 2000  
19 Seattle, WA 98104-3188  
20 (360) 709-6470  
21 Lauryn.Fraas@atg.wa.gov  
22 Colleen.Melody@atg.wa.gov  
23 *Attorneys for Physicians Plaintiffs 1-3*

24 KEITH ELLISON  
25 Attorney General of Minnesota

26 /s/ James W. Canaday  
JAMES W. CANADAY, MSBA #030234X\*  
Deputy Attorney General  
445 Minnesota St., Ste. 600  
St. Paul, Minnesota 55101-2130  
(651) 757-1421  
james.canaday@ag.state.mn.us  
*Attorneys for Plaintiff State of Minnesota*

DAN RAYFIELD  
Attorney General of Oregon

/s/ Allie M. Boyd

ALLIE M. BOYD, WSBA #56444

Senior Assistant Attorney General

Trial Attorney

1162 Court Street NE

Salem, OR 97301-4096

(503) 947-4700

allie.m.boyd@doj.oregon.gov

*Attorneys for Plaintiff State of Oregon*

\*pro hac vice application forthcoming